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<b>Application Data Sheet 37 CFR 1.76</b>		<b>Attorney Docket Number</b>	27129U
		<b>Application Number</b>	
<b>Title of Invention</b>	ORTHOPEDIC CLAMPS		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76. This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

**Secrecy Order 37 CFR 5.2**

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

**Applicant Information:**

<b>Applicant 1</b>				<a href="#">Remove</a>
<b>Applicant Authority</b> <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117		<input type="radio"/> Party of Interest under 35 U.S.C. 118
<b>Prefix</b>	<b>Given Name</b>	<b>Middle Name</b>	<b>Family Name</b>	<b>Suffix</b>
	Hamid		SHARIM	
<b>Residence Information (Select One)</b> <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service				
<b>City</b>	Kochav Yair	<b>Country Of Residence<sup>i</sup></b>	IL	
<b>Citizenship under 37 CFR 1.41(b)<sup>i</sup></b>		IL		
<b>Mailing Address of Applicant:</b>				
<b>Address 1</b>	94 Gilboa Street			
<b>Address 2</b>	P.O. Box 1123			
<b>City</b>	Kochav Yair	<b>State/Province</b>		
<b>Postal Code</b>	44864	<b>Country<sup>i</sup></b>	IL	
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button.				
				<a href="#">Add</a>

**Correspondence Information:**

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).			
<input type="checkbox"/> An Address is being provided for the correspondence Information of this application.			
<b>Customer Number</b>	20529		
<b>Email Address</b>		<a href="#">Add Email</a>	<a href="#">Remove Email</a>

**Application Information:**

<b>Title of the Invention</b>	ORTHOPEDIC CLAMPS		
<b>Attorney Docket Number</b>	27129U	<b>Small Entity Status Claimed</b>	<input checked="" type="checkbox"/>
<b>Application Type</b>	Nonprovisional		
<b>Subject Matter</b>	Utility		
<b>Suggested Class (if any)</b>		<b>Sub Class (if any)</b>	
<b>Suggested Technology Center (if any)</b>			
<b>Total Number of Drawing Sheets (if any)</b>	6	<b>Suggested Figure for Publication (if any)</b>	

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		Application Number	
Title of Invention	ORTHOPEDIC CLAMPS		

**Publication Information:**
☐ Request Early Publication (Fee required at time of Request 37 CFR 1.219)

☐ **Request Not to Publish.** I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.

**Representative Information:**

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.

Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> Limited Recognition (37 CFR 11.9)
Customer Number	20529		

**Domestic Benefit/National Stage Information:**

This section allows for the applicant to either claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c) or indicate National Stage entry from a PCT application. Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

Prior Application Status		<a href="#">Remove</a>	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
10560901	a 371 of international	PCT/IL2004/000524	2004-06-17
Prior Application Status		<a href="#">Remove</a>	
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)
PCT/IL2004/000524	non provisional of	60478855	2003-06-17
Additional Domestic Benefit/National Stage Data may be generated within this form by selecting the Add button. <a href="#">Add</a>			

**Foreign Priority Information:**

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

			<a href="#">Remove</a>
Application Number	Country <sup>1</sup>	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
			<input checked="" type="radio"/> Yes <input type="radio"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button. <a href="#">Add</a>			

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<b>Title of Invention</b>	ORTHOPEDIC CLAMPS		

**Assignee Information:**

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

**Assignee 1**[Remove](#)If the Assignee is an Organization check here. ☒**Organization Name** FACET-MED LTD.**Mailing Address Information:****Address 1** c/o Barnes & Co.**Address 2** Amzur House, 8 Hasadnaot Street**City** Herzeliya Pituach**State/Province****Country** <sup>i</sup>

IL

**Postal Code**

46726

**Phone Number****Fax Number****Email Address**

Additional Assignee Data may be generated within this form by selecting the Add button.

[Add](#)**Signature:**

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.

<b>Signature</b>	/Derek Richmond/		<b>Date (YYYY-MM-DD)</b>	2010-07-28	
<b>First Name</b>	Derek	<b>Last Name</b>	Richmond	<b>Registration Number</b>	45771

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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The Privacy Act of 1974 (P.L. 93-579) requires that you be given certain information in connection with your submission of the attached form related to a patent application or patent. Accordingly, pursuant to the requirements of the Act, please be advised that: (1) the general authority for the collection of this information is 35 U.S.C. 2(b)(2); (2) furnishing of the information solicited is voluntary; and (3) the principal purpose for which the information is used by the U.S. Patent and Trademark Office is to process and/or examine your submission related to a patent application or patent. If you do not furnish the requested information, the U.S. Patent and Trademark Office may not be able to process and/or examine your submission, which may result in termination of proceedings or abandonment of the application or expiration of the patent.

The information provided by you in this form will be subject to the following routine uses:

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6. A record in this system of records may be disclosed, as a routine use, to another federal agency for purposes of National Security review (35 U.S.C. 181) and for review pursuant to the Atomic Energy Act (42 U.S.C. 218(c)).
7. A record from this system of records may be disclosed, as a routine use, to the Administrator, General Services, or his/her designee, during an inspection of records conducted by GSA as part of that agency's responsibility to recommend improvements in records management practices and programs, under authority of 44 U.S.C. 2904 and 2906. Such disclosure shall be made in accordance with the GSA regulations governing inspection of records for this purpose, and any other relevant (i.e., GSA or Commerce) directive. Such disclosure shall not be used to make determinations about individuals.
8. A record from this system of records may be disclosed, as a routine use, to the public after either publication of the application pursuant to 35 U.S.C. 122(b) or issuance of a patent pursuant to 35 U.S.C. 151. Further, a record may be disclosed, subject to the limitations of 37 CFR 1.14, as a routine use, to the public if the record was filed in an application which became abandoned or in which the proceedings were terminated and which application is referenced by either a published application, an application open to public inspections or an issued patent.
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